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## APPLICANTS

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\*\* CONTINUING DATA \*\*\*\*\* YES/MAY

This application is a CIP of 09/159,814 09/23/1998 ABN

\*\* FOREIGN APPLICATIONS \*\*\*\*\* NONE/MAY

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* SMALL ENTITY \*\*

\*\* 10/14/1999

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY ME	SHEETS DRAWING 9	TOTAL CLAIMS 87	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	Verified and Acknowledged Examiner's Signature <i>M. Gonzalez</i> Initials			

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## TITLE

SAFE AND EFFECTIVE BIOFILM INHIBITORY COMPOUNDS AND HEALTH-RELATED USES THEREOF

FILING FEE  RECEIVED 1057	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____
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